

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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Claim	Date
Final	
Original	
51	✓
52	✓
53	✓
54	✓
55	✓
56	✓
57	✓
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69	✓
70	✓
71	✓
72	✓
73	○
74	○
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77	○
78	○
79	✓
80	○
81	○
82	○
83	○
84	○
85	○
86	○
87	○
88	✓
89	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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